

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

ADDRESS (number and street)

PO Box 4184

Check if different
than previously
reported. (ACC)

New York

NY

10163

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00688655

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☒ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
03 01 2021

through

M M M / D D D / Y Y Y Y Y Y
03 31 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Paone, Tara, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Paone, Tara, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 20 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
03 / 01 / 2021 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2021		87796.72
(b) Cash on Hand at Beginning of Reporting Period.....	6614.65	
(c) Total Receipts (from Line 19)	230134.62	249357.76
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	236749.27	337154.48
7. Total Disbursements (from Line 31).....	41543.11	141948.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	195206.16	195206.16
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	25317.93	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
03 / 01 / 2021

To:

M M / D D / Y Y Y Y Y
03 / 31 / 2021

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

226558.12

234883.22

(ii) Unitemized

3576.50

14473.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

230134.62

249356.22

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

230134.62

249356.22

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

1.54

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

230134.62

249357.76

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

230134.62

249357.76

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	41543.11	139080.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	41543.11	139080.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	2867.64
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	41543.11	141948.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41543.11	141948.32

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	230134.62	249356.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	230134.62	249356.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	41543.11	139080.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	41543.11	139080.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Everytown For Gun Safety Action Fund

Mailing Address PO Box 4184

City
New York

State
NY

Zip Code
10163-4184

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206483.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2021

Transaction ID : 36995

Amount of Each Receipt this Period

200000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Everytown For Gun Safety Action Fund

Mailing Address PO Box 4184

City
New York

State
NY

Zip Code
10163-4184

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206483.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2021

Transaction ID : 36996

Amount of Each Receipt this Period

758.12

☐ Memo Item

* In-Kind: Staff Time & Overhead

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Horing, Jeff, , ,

Mailing Address 21 C E 12Th St

City
New York

State
NY

Zip Code
10003-4300

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Insight Partners

Occupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2021

Transaction ID : 36997

Amount of Each Receipt this Period

12500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

213258.12

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Horing, Patricia, , ,

Mailing Address 61 5Th Ave

City
New YorkState
NYZip Code
10003-4581FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2021

Transaction ID : 36998

Amount of Each Receipt this Period

12500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lurie, Yoav, , ,

Mailing Address 1412 North St

City
BoulderState
COZip Code
80304-3512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 01 / 2021

Transaction ID : 37034

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ACTBLUE

Mailing Address 14 Arrow St
Ste 11City
CambridgeState
MAZip Code
02138-5106FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2463.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2021

Transaction ID : 37034E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶

12600.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Olsen, Ann, P, ,

Mailing Address 16816 Marquez Ave

City
Pacific PalisadesState
CAZip Code
90272-3242FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2021

Transaction ID : 37004

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Roof, Meghan, , ,

Mailing Address 605 Alfa Dr

City
FrankfortState
KYZip Code
40601-4405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
School Year AbroadOccupation (for Individual)
Study Abroad Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2021

Transaction ID : 37116

Amount of Each Receipt this Period

150.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ACTBLUE

Mailing Address 14 Arrow St
Ste 11City
CambridgeState
MAZip Code
02138-5106FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2463.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2021

Transaction ID : 37116E

Amount of Each Receipt this Period

150.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Yoder-Schrock, Gretchen, , ,

Mailing Address 7626 Santa Inez Ct

City
Gilroy

State
CA

Zip Code
95020-5326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Christopher High School

Occupation (for Individual)
Activities Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2021

Transaction ID : 37028

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

226558.12

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031Purpose of Disbursement
Credit Card Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2021

FEC Identification Number

C

Transaction ID : 500001332

Amount of Each Disbursement this Period

19.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031Purpose of Disbursement
Credit Card Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2021

FEC Identification Number

C

Transaction ID : 500001333

Amount of Each Disbursement this Period

6.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031Purpose of Disbursement
Credit Card Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2021

FEC Identification Number

C

Transaction ID : 500001334

Amount of Each Disbursement this Period

20.93

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46.87

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031Purpose of Disbursement
Credit Card Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	8			2	0	2	1		

FEC Identification Number

C

Transaction ID : 500001335

Amount of Each Disbursement this Period

31.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031Purpose of Disbursement
Credit Card Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	2	1		

FEC Identification Number

C

Transaction ID : 500001336

Amount of Each Disbursement this Period

19.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bank Of America

Mailing Address 100 N Tryon St

City
CharlotteState
NCZip Code
28202-4000Purpose of Disbursement
Bank Fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	2			2	0	2	1		

FEC Identification Number

C

Transaction ID : 500001320

Amount of Each Disbursement this Period

19.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.82

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Full Name (Last, First, Middle Initial)

A. Bank Of America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2021

Mailing Address 100 N Tryon St

City
CharlotteState
NCZip Code
28202-4000Purpose of Disbursement
Bank Fee

001

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 500001321

Amount of Each Disbursement this Period

326.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blue Wave Political Partners, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2021

Mailing Address 401 2Nd Ave S
Ste 303City
SeattleState
WAZip Code
98104-2862Purpose of Disbursement
Compliance Consulting

001

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 500001322

Amount of Each Disbursement this Period

3750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Civis Analytics Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2021

Mailing Address 200 W Monroe St
Ste 2200City
ChicagoState
ILZip Code
60606-5070Purpose of Disbursement
Data Analytics Services

001

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 500001323

Amount of Each Disbursement this Period

1771.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5848.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Full Name (Last, First, Middle Initial)

A. Civis Analytics Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2021

Mailing Address 200 W Monroe St
Ste 2200City
ChicagoState
ILZip Code
60606-5070Purpose of Disbursement
Data Analytics Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 500001324

Amount of Each Disbursement this Period

1771.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CT Corporation

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2021

Mailing Address PO Box 4349

City
Carol StreamState
ILZip Code
60197-4349Purpose of Disbursement
Registered Agent Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 500001325

Amount of Each Disbursement this Period

430.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Everytown For Gun Safety Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2021

Mailing Address PO Box 4184

City
New YorkState
NYZip Code
10163-4184Purpose of Disbursement
In-Kind Received: Staff Time & Overhead

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 500001319

Amount of Each Disbursement this Period

758.12

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2959.52

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Full Name (Last, First, Middle Initial)

A. Geller AdvisorsMailing Address 909 3Rd Ave
FI 16City
New YorkState
NYZip Code
10022-4797Purpose of Disbursement
Finance & Accounting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	3			2	0	2	1		

FEC Identification Number

C

Transaction ID : 500001326

Amount of Each Disbursement this Period

19904.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Merkle Response Services

Mailing Address 100 Jamison Ct

City
HagerstownState
MDZip Code
21740-5185Purpose of Disbursement
Mail Processing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	3			2	0	2	1		

FEC Identification Number

C

Transaction ID : 500001327

Amount of Each Disbursement this Period

1550.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc.Mailing Address 1445 New York Ave NW
Ste 200City
WashingtonState
DCZip Code
20005-2158Purpose of Disbursement
Software Rental

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	2			2	0	2	1		

FEC Identification Number

C

Transaction ID : 500001328

Amount of Each Disbursement this Period

2177.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

23632.46

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

Full Name (Last, First, Middle Initial)

A. Venable LLP

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	3			2	0	2	1		

Mailing Address 750 E Pratt St
Ste 900City
BaltimoreState
MDZip Code
21202-3157Purpose of Disbursement
Legal Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

FEC Identification Number

C

Transaction ID : 500001329

Amount of Each Disbursement this Period

8954.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

8954.00

TOTAL This Period (last page this line number only)..... ►

41511.87

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 18

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blue Wave Political Partners, LLCNature of Debt (Purpose):
Compliance ConsultingMailing Address 401 2Nd Ave S
Ste 303City
SeattleState
WAZip Code
98104-2862

Outstanding Balance Beginning This Period

3750.00

Transaction ID : 1250000035

Amount Incurred This Period

0.00

Payment This Period

3750.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blue Wave Political Partners, LLCNature of Debt (Purpose):
Compliance ConsultingMailing Address 401 2Nd Ave S
Ste 303City
SeattleState
WAZip Code
98104-2862

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000039

Amount Incurred This Period

3750.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3750.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Civis Analytics IncNature of Debt (Purpose):
Data Analytics ServicesMailing Address 200 W Monroe St
Ste 2200City
ChicagoState
ILZip Code
60606-5070

Outstanding Balance Beginning This Period

1771.40

Transaction ID : 1250000036

Amount Incurred This Period

0.00

Payment This Period

1771.40

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3750.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 18

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Geller Advisors

Nature of Debt (Purpose):

Finance and Accounting Services

Mailing Address 909 3Rd Ave
FI 16City
New YorkState
NYZip Code
10022-4797

Outstanding Balance Beginning This Period

19904.07

Transaction ID : 1250000038

Amount Incurred This Period

0.00

Payment This Period

19904.07

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Geller Advisors

Nature of Debt (Purpose):

Finance and Accounting Services

Mailing Address 909 3Rd Ave
FI 16City
New YorkState
NYZip Code
10022-4797

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000041

Amount Incurred This Period

19390.43

Payment This Period

0.00

Outstanding Balance at Close of This Period

19390.43

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

NGP VAN, Inc.

Nature of Debt (Purpose):

Software Rental

Mailing Address 1445 New York Ave NW
Ste 200City
WashingtonState
DCZip Code
20005-2158

Outstanding Balance Beginning This Period

2177.50

Transaction ID : 1250000037

Amount Incurred This Period

0.00

Payment This Period

2177.50

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

19390.43

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 18

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

EVERYTOWN FOR GUN SAFETY VICTORY FUND (EVERYTOWN VICTORY FUND)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

NGP VAN, Inc.Nature of Debt (Purpose):
Software RentalMailing Address 1445 New York Ave NW
Ste 200City
WashingtonState
DCZip Code
20005-2158

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000040

Amount Incurred This Period

2177.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

2177.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

2177.50

2) **TOTALS** This Period (last page this line number only)..... ►

25317.93

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

25317.93